

BROOKHAVEN NATIONAL LABORATORY

SBMS Interim Procedure

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Title: Documenting OSH Management System (OSH MS) Objectives/Targets and OSH Management Programs (OMPs)

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Management System: Occupational Safety and Health

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Applicability: Plant Engineering Division, Central Fabrication Services Division and Collider-Accelerator Department

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1. Purpose

- 1.1. This procedure is designed to ensure that BNL organizations have identified and documented objectives and targets for occupational safety and health.

2. Definitions

- 2.1. Refer to the Definitions contained in OHSAS 18001 Clause 3.

3. Responsibilities

- 3.1. The OSH Management System Representative is responsible for ensuring OSH targets and objectives are assigned each year.
- 3.2. When requested by line management, personnel shall complete assigned targets.

4. Scope

- 4.1. The following procedure provides a minimum set of steps available to the OSH Management Representative for documenting OSH objectives/targets and OSH Management Programs. The method is to create a stand alone OSH Management Program document for each facility/area or job, or for the facility as a whole. See the [OSH Management Plan for C-AD](#) for a similar but slightly more elaborate example.

5. Procedure

- 5.1. Facility/Area/Job - Specify whether the OSH Management Program (OMP) applies to a particular facility/area or job within the organization, or if it applies throughout the organization.
- 5.2. Objectives - Link specific *objectives* to a Laboratory-level Critical Outcome/Objective that the organization is supporting; typically related to compliance, injury-rate reduction, or improvement of an OSH element.
 - 5.2.1. Consider the following sources for occupational safety and health objectives: employee input, management review priorities, FRA/JRA results, BNL ESSH Policy, BNL Vision Statement, occurrences, past performance, legal requirements, Policy Council decisions, management directives, DOE Directives, Laboratory Safety Improvement Plans, financial plans, external and internal assessments and ad hoc committee reports.
- 5.3. Targets - Translate the high-level objectives to organization-level *targets* that are pragmatic and specific to the particular facility, area or job.
- 5.4. Performance Measures - Identify the indicators relating to the *targets* that can and will demonstrate whether the organization successfully achieved the *target*, and ultimately the *objective*.
- 5.5. Improvement and Compliance Initiatives - Summarize the improvement and/or compliance initiative that the organization will be undertaking that has been designed to achieve the *targets*, and ultimately the *objective*. Do not describe the operations, but instead focus on the change or actions that will be implemented to attain compliance with regulatory requirements, injury-rate reduction, or improve the OSH Management System.
- 5.6. Funding - Specify the source of funding for the OMP, clearly identifying when special funding from a Laboratory account is being requested (and the amount), when funding is coming from direct organization support such as an organization's operating account, or when funding is coming from a specific program account (and the amount).
- 5.7. Actions - List the particular tasks required to complete the initiative described in the OSH Improvement / Compliance Program Description.

- 5.8. Responsibility - List the position (or person) responsible for completing each task.
- 5.9. Due Dates - List the due date for task completion.
- 5.10. Status - Either reference the tracking system where progress is being monitored and status can be determined, or indicate status (e.g., in progress, complete, on hold, pending).